

Idaho Department of Environmental Quality

UNDERGROUND STORAGE TANKS

30 DAY NOTICE OF CLOSURE

| | | FACILITY ID#: | COUNTY:_ | | |
|---------------------------|---|------------------------------|---------------------------------------|--------------------|--|
| SITE/FA | CILITY INFOR | MATION: | | | |
| Facility Na | me: | | | | |
| Facility Loc | cation: | Street | | | |
| | | | City, State | Zip | |
| OWNER | OPERATOR II | NFORMATION: | | | |
| Owner/Ope | erator: | | | | |
| Mailing Ad | dress: | Street | City State | 7:- | |
| Phone: <u>(</u>) | | | City, State | Zip | |
| TANK II | NFORMATION | (attach addition | nal pages if needed) | | |
| | with §280.71 of the Federalose the following tanks: | al EPA Underground Storage T | ank Regulations, we are notifying you | u of our intent to | |
| TANK ID | PROJECTED CLOSURE | DATE TANK CAPACITY | SUBSTANCE STORED | DATE LAST USED | |
| | | | | | |
| | | | | | |
| | | | | | |
| CLOSUI | RE TO BE PERI | FORMED BY: | | | |
| Name of Si | te Supervisor: | | | | |
| Name of Co Site Assess | C | | | | |
| SHE ASSESS | UI | | Phone: | | |
| have read th | ne instructions on pag | e 2 and concede the above | ve-stated information is comp | lete and accurate. | |
| OWNER/OI | PERATOR SIGNAT | TURE: | | DATE: | |

Tanks Must Be Registered Prior to Submission of this Form and Before Closure Can Begin.

Only signatures by owner/operators will be accepted. UST technicians' signatures cannot be used.





INSTRUCTIONS FOR COMPLETING THE 30 DAY NOTICE OF CLOSURE FORM

Complete all areas. Return at least 30 days before tank closure.

SITE/FACILITY INFORMATION:

Fill in the Facility ID# and County where tanks are located. The Facility ID# is assigned by DEQ to UST facilities that have been previously registered. Complete all site/facility information. The contact telephone number must be included to ensure that problems will be resolved quickly.

TANK INFORMATION:

List all tanks to be closed. It is imperative to include the projected closure date, and tank ID number(s) for all tanks to be removed.

TANK CLOSURE:

In order to confirm removal date, owners must contact the regional DEQ office responsible for site area AT LEAST 48 HOURS PRIOR TO REMOVAL. Owners are required to conduct a site assessment which must be performed before tank closure is completed and report any petroleum release to the local DEQ office. Records of closure must also be maintained at the site and available upon inspector's request for at least three years after closure.

Contact your local fire and building departments prior to tank closure to find out about any additional permits that may be required by the county or other local jurisdictions.

CAUTION: UNDERGROUND STORAGE TANK REMOVAL CAN BE DANGEROUS!

This is a potentially dangerous operation due to flammability and other hazards

associated with the contents of the tank.

We recommend you hire an experienced contractor to perform closure work.

<u>CAUTION</u>: Tanks that previously contained petroleum products or hazardous chemicals must not be used for the storage of food or liquid intended for animal or human consumption.

AFTER TANK CLOSURE:

A signed **Notification for Underground Storage Tanks** form must be updated with closure information and submitted within 30 days of receiving the site assessment results. Send both the 30 Day Notice of Closure and updated notification form to:

Department of Environmental Quality Underground Storage Tank Program 1410 N. Hilton Boise, ID 83706 (208) 373-0502

If you have not registered your tanks, you may obtain a **Notification for Underground Storage Tanks** form from the above address or the local regional DEQ office.